



Insurance is  
our only business.

**KNIGHTS OF COLUMBUS:**

**ALBERTA & NORTHWEST TERRITORIES STATE COUNCIL  
and All of its Councils, Assemblies, Officers & Members.**

Please use this form if proof of insurance is required for any function your council is hosting.

Complete and Return Application to: Vince Knight: [vknight@hsmininsurance.com](mailto:vknight@hsmininsurance.com)  
or: Gabrielle Davis: [gdavis@hsmininsurance.com](mailto:gdavis@hsmininsurance.com)

Council# \_\_\_\_\_ Contact Name: \_\_\_\_\_  
Phone# \_\_\_\_\_ Email: \_\_\_\_\_

Name & Description of Event:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Location of Event: (Please give full name and address including postal code)

\_\_\_\_\_  
\_\_\_\_\_

Dates | From: \_\_\_\_\_ To: \_\_\_\_\_

Times | From: \_\_\_\_\_ To: \_\_\_\_\_

Additional Insured, if required: (Please give full name and address)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If you would like Hendry Swinton McKenzie to email a copy of the Certificate of Insurance directly to the Additional Insured on your behalf, Please provide:

Contact name for Additional Insured: \_\_\_\_\_

Phone# \_\_\_\_\_ Email: \_\_\_\_\_

**Victoria**

830 Pandora Ave.  
Victoria, BC V8W 1P4  
250 388 5555

**Westshore**

963 Langford Parkway  
Victoria, BC, V9B 0A5  
250 478 5588

**Duncan**

951 Canada Avenue  
Duncan, BC, V9L 1V2  
250 856 9440